



TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>	Application Number	10/684,686	
	Filing Date	October 13, 2003	
	First Named Inventor	Ye, Zhou	
	Art Unit	2683	
	Examiner Name	S. Dagosta	
Total Number of Pages in This Submission	14	Attorney Docket Number	021756-002800US

ENCLOSURES (Check all that apply)			
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Postcard; Request for Continued Examination (RCE) with fee authorization.
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers		
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition		
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application		
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address		
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer		
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund		
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____		
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Landscape Table on CD		
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	Remarks The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.		
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53			
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Townsend and Townsend and Crew LLP		
Signature			
Printed name	Jason D. Lohr		
Date	03/03/2006	Reg. No.	48,163

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Signature			
Typed or printed name	Dana Kane	Date	03/03/2006